PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/538533

								10/920999					
CLAIMS AS FILED - PART					SMALL ENT			TITY	00	OTHER			
US	NATIONAL	STAGE FEES	(Colum	in 1)		(Column 2)	7	1176		OR	SMALL	ENTITY	
_		STAGE FEES						RATE	FEE		RATE	FEE	
-	SIC FEE		SMALL ENT. = \$ 150			GE ENT. = \$ 300		BASIC FEE	150	OR	BASIC FEE		
EXAMINATION FEE			Satisfies PCT Article 33(1)- (4) = \$50/\$100			ther situations = 100 / \$ 200		EXAM. FEE	50		EXAM. FEE		
SEARCH FEE			All other situations (ie. No Search Rpt.) = \$ 250 / \$ 500		ALL	ISA = \$50 / \$100 other countries = \$200 / \$400		SEARCH FEE	50		SEARCH FEE		
FEE FOR EXTRA SPEC. PGS.			minus 100 =			/ 50 =]	X \$ 125 =			X \$ 250 =		
TOTAL CHARGEABLE CLAIMS			17 mir	nus 20 =	*		1	X \$ 25 =		OR	X \$ 50 =		
-	EPENDENT CL		<u> </u>	inus 3 =	*			X \$ 100 =		OR	X \$ 200 =		
_		DENT CLAIM PR						+ \$ 180 =		OR	+ \$ 360 =		
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL	<i>35</i> 0	OR	TOTAL			
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL E	NTITY	OR	OTHER SMALL E		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	·	HIGH NUME PREVIO PAID I		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =		
	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =		
							•	TOTAL ADDIT. FFF		OR	TOTAL ADDIT.		
		(Column 1)		(Colum		(Column 3)					•		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOI PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X \$ 25 =		OR	X \$ 50 =		
	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =		
							_	TOTAL ADDIT:		OR -	TOTAL ADDIT. FFF		
***	If the "Highest Nu If the "Highest Nu	umn 1 is less than the Imber Previously Pai Imber Previously Paid Imber Previously Paid	d For" IN THIS SP. d For" IN THIS SP.	ACE is less	than '20 than '3'	", enter "20".	in the	e appropriate box ii	n column 1.				

FORM PTO-875 (Rev. 02/2005)

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